## PATENT ATTORNEY DOCKET NO. 07588/008001

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Kraus et al.

Confirmation No.:

5973

Serial No.:

09/698,893

Art Unit:

1632

Filed:

October 27, 2000

Examiner:

Anne Marie Falk

Customer No.:

21559

Title:

METHODS FOR IMPROVING CENTRAL NERVOUS SYSTEM

**FUNCTIONING** 

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## REPLY TO NOTICES OF ALLOWANCE AND ALLOWABILITY

In reply to the Notices of Allowance and Allowability that were mailed in connection with the above-captioned application on December 15, 2009 and having confirmation number 5973, enclosed is a completed fee transmittal form PTOL-85. Applicants submit that all of the requirements for allowance of this application have been met.

Please note that the entity status of this application has changed. Applicants hereby request removal of small entity status, pursuant to 37 C.F.R. § 1.27(g)(2).

Applicants hereby authorize the Office to deduct the fee of \$1510.00 to cover the issue fee required by 37 C.F.R. § 1.18(a). If there are any additional charges or any credits, please apply them to Deposit Account No. 03-2095.

Respectfully submitted,

Date: A January 2010

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## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

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21559 7590 12/15/2009 CLARK & ELBING LLP 101 FEDERAL STREET BOSTON, MA 02110				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/698,893	10/27/2000		Morey Kraus		07588/008001	5973
TITLE OF INVENTION: METHODS FOR IMPROVING CENTRAL NERVOUS SYSTEM FUNCTIONING						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	B DATE DUE
nonprovisional	YES	\$755	\$0	\$0	\$755	03/15/2010
EXAM	INER	ART UNIT	CLASS-SUBCLASS	]		
FALK, ANI	NE MARIE	1632	424-093100			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1,363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			4 71 /			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Viacell, Inc.  Worcester, MA  The General Hospital Corp.  Boston, MA  Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) are submitted:    Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above the senctosed.   A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   The Director is hereby authorized to charge the required fee(s), any deficiency, or overpayment, to Deposit Account Number 03-2095 (enclose an extra copy						,
* *	SMALL ENTITY statu	s. See 37 CFR 1.27.			LENTITY status. See 37 Cl	
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Authorized Signature of Typed or printed name	Tw Cat Paul T. Clark	Todd Am Reg. No.	nstrong, Ph.D. 54,590	Date 2 Registration No	9 January 201	o
an application. Confidenti submitting the completed his form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	tality is governed by 35 application form to the ons for reducing this burdinginia 22313-1450. DO 13-1450.	U.S.C. 122 and 37 CFR I USPTO. Time will vary den, should be sent to the NOT SEND FEES OR C	1.14. This collection is est depending upon the indiv chief Information Office COMPLETED FORMS TO	imated to take 12 mi idual case. Any com r, U.S. Patent and Ti ) THIS ADDRESS.	e public which is to file (and inutes to complete, includin iments on the amound of rademark Office, U.S. Dept SEND TO: Commissioner I splays a valid OMB control	g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,